

OPEN ENROLLMENT

2011

Laboratory Retiree Guidebook

Open Enrollment will begin October 25, 2010, and end November 19, 2010.

****All elections are for the January 1- December 31, 2011, plan year****

For plans governed by the Employee Retirement Income Security Act (ERISA), this 2011 Open Enrollment Guidebook serves as a summary of material modifications (SMM) to the [LANL Health and Welfare Benefit Plan for Retirees](#). The Laboratory reserves the right to amend or discontinue any benefit plans at any time. If there is a conflict between this summary and the terms of the plan document, the plan document governs.

Welcome to 2011 Open Enrollment:

Every October Los Alamos National Laboratory retirees are invited to participate in their annual Open Enrollment period. As a LANL retiree, it is important to remember you have options for your health and welfare retirement benefits and are encouraged to take an active role in knowing those benefits.

Open Enrollment is a time that provides retirees with the opportunity to understand their benefit choices, manage their enrollment elections, and prepare for the upcoming year. In this annual Open Enrollment informational guidebook, retirees will find information on new changes for 2011, how to participate in Open Enrollment, and annual notices, plan details and other useful tools.

Important 2011 Open Enrollment Dates:

6:00 a.m. (MST) October 25, 2010 – 10:59 p.m. (MST) November 19, 2010

➤ **2011 Open Enrollment Dates:**

The 2011 Open Enrollment session will begin at 6:00 a.m. (MST) Monday, October 25, 2010, and end at 10:59 p.m. (MST) Friday, November 19, 2010.

➤ **Information Sessions**

The LANL Benefits Office, together with Hewitt and Associates, will provide the following information sessions for retirees before the 2011 Open Enrollment period will officially begin. Please feel free to attend one of the information sessions to ensure that all of your questions are addressed.

<u>Open Enrollment Information Sessions</u>		
Location	Date	Sessions
Marriot Pyramid North 5151 San Francisco NE Albuquerque, NM 87109 (505) 821-3333	Monday, October 4	10:00am
The Lodge 750 North Saint Francis Dr. Santa Fe, NM 87501 (505) 992-5800	Wednesday, October 6	1:00pm
Los Alamos High School Dwayne Smith Auditorium Los Alamos, NM 87544 (505) 663-2510	Wednesday, October 6	6:00pm
Santa Claran Hotel (Big Rock Casino) 260 North Riverside Drive Española, NM 87532 (505) 367-4500	Thursday, October 7	1:00pm
Los Alamos High School Dwayne Smith Auditorium Los Alamos, NM 87544 (505) 663-2510	Thursday, October 7	6:00pm

What's New For 2011:

Please know that if you are satisfied with your current enrollments and have no plan changes to make, no action is required by you for the 2011 Open Enrollment. You should, however, be aware of several significant changes for the 2011 plan year that may impact your enrollment decisions.

If you are eligible for **Medicare**, you must **enroll in Medicare Parts A and B**.
Please see the LANS Retiree Health and Welfare Plan Summary for more information
http://www.lanl.gov/worklife/benefits/pdfs/plan_retiree.pdf

The Patient Protection and Affordable Care Act (Health Care Reform):

In March 2010, President Obama signed the Patient Protection and Affordable Care Act (PPACA) into Federal law. While the PPACA has reformed various facets of health insurance, changing how group health plan administrators and companies alike provide health insurance to their participants, as a stand-alone plan, LANL's Retiree Health and Welfare benefit plan is **not subject** to the laws of the PPACA. As such, retirees will not experience any plan changes as a result of the new law. Be aware this information is subject to change. If any changes occur, you will be promptly notified.

NEW for Retiree Health & Welfare Plans:

➤ **NEW Mental and Behavioral Health Plan Administrator:**

Retirees will have a new carrier for their mental and behavioral health plan for 2011. Blue Cross Blue Shield of New Mexico (BCBSNM) will be assuming the responsibility from Mesa Mental Health as the insurance carrier for LANL mental and behavioral health care.

➤ **NEW Benefit Limits and Plan Enhancements for Legal Coverage:**

ARAG has implemented several changes to the plan for 2011. For example, retirees enrolled in legal coverage will experience a change to the limit of hours allowed for certain proceedings (Matrimonial Proceeding will be limited to 15 hours and Child Support/Child Custody benefits will be limited to 8 hours). As a plan enhancement, the coverage now incorporates the addition of Defense of Civil Damage Claims and Property Protection. For questions regarding ARAG's benefits, please contact ARAG at 1-800-247-4184.

➤ **NEW Premiums for Retiree Dental and Vision Plans:**

New premiums will be in effect for both dental and vision plans beginning with the 2011 plan year. Retirees enrolled in dental insurance will experience a slight increase to plan premiums, while retirees enrolled in vision insurance will see a decrease in premiums. The dental plan is subject to graduated eligibility; therefore, the premium increase may impact each retiree differently based on graduated eligibility. The vision plan is not subject to graduated eligibility; therefore, the retiree pays for this coverage entirely.

➤ **NEW for Medicare-Eligible Retirees:**

New medical premiums will be in effect for the 2011 plan year. As announced in July of this year, a combination of increasing medical insurance costs, participant usage of the Plan, and a Laboratory directive received from NNSA-DOE will result in the implementation of Medicare-eligible retiree premium contributions.

To maintain the generous benefit plan currently enjoyed by participants and to comply with the NNSA-DOE mandate, effective January 1, 2011, all Medicare eligible retirees will begin contributing 20 percent of the gross (employer + retiree) premium cost to be consistent with the percentage paid by active employees. Please note that for retirees who are subject to graduated eligibility, the 20 percent premium cost is in addition to the graduated eligibility percentage you currently pay. Medicare Part B reimbursement of \$96.40 per month for each eligible, enrolled Medicare participant will still be provided as a credit toward the premium due.

➤ **NEW for Non-Medicare-Eligible Retirees:**

New medical premiums will be in effect for the 2011 plan year. Rising costs for medical insurance and dramatic increases in participant usage of the Plan have contributed to a need for an increase in the premiums paid for medical coverage. In keeping with a NNSA-DOE directive to have non-Medicare-eligible retiree premium contributions aligned with those of active employees, non-Medicare retirees will experience an average premium increase of 30 percent starting January 1, 2011.

Please see pages 9-10 for plan premiums.

2011 Health and Welfare Plan Information

If you are satisfied with your current enrollments, and have no plan changes to make, you do not need to do anything for 2011 Open Enrollment.

The following is a quick overview of the health and welfare plans for 2011:

➤ **Medical Plans:**

Blue Cross Blue Shield of New Mexico remains the Laboratory's medical insurance carrier for 2011. Your medical plan options for 2011 include the National Exclusive Provider Option (EPO), National Preferred Provider Option (PPO), National Consumer-Directed Health Plan (CDHP), and the National Medicare Supplement plans. Please consult the medical plan summaries for more information (<http://www.lanl.gov/worklife/benefits/summaries.shtml>).

- **The National EPO Plan At-a-Glance**

This plan is available for those with or without Medicare coverage.

This plan helps keep costs in control by restricting coverage to in-network doctors and facilities (except in the case of emergency or prior medical approval). You are responsible for a \$20 co-payment for in-network office visits. Any additional costs are subject to a deductible and co-insurance (e.g., diagnostic X-rays or lab work). Please see the EPO benefit booklet at:

http://www.lanl.gov/worklife/benefits/pdfs/bcbsnm_epo.pdf

- **The National PPO Plan At-a-Glance**

This plan is available for those with or without Medicare coverage.

This plan helps keep costs in control by paying a more substantial benefit for services that are rendered with in-network doctors and facilities. Out-of-network services are covered at a reduced amount and subject to Blue Cross Blue Shield of New Mexico's allowable cost. Like the EPO, you are responsible for a \$20 co-payment for in-network office visits. Any additional costs are subject to a deductible and co-insurance (e.g., diagnostic X-rays or lab work).

For more information, please see the PPO benefit booklet at:

http://www.lanl.gov/worklife/benefits/pdfs/bcbsnm_ppo.pdf

- **The National Consumer-Directed Health Plan (CDHP) At-a-Glance**

This plan is available only for those without Medicare coverage.

This type of plan is available for those without Medicare coverage. This plan is known as a consumer-directed health plan – it places greater control of healthcare expenditures in the hands of the plan participant. The Laboratory contributes one-half of your total deductible into a Health Reimbursement Account (HRA). Until the HRA is exhausted, you pay nothing out of pocket for eligible in and out of network services. If the HRA is exhausted, then you must pay the remainder of the deductible. After the deductible has been met, you are responsible for paying 10 percent co-insurance for eligible in-network services. Any funds remaining in your HRA at the end of the plan year will be rolled over into the next plan year's HRA (subject to a maximum three-year roll-over). Please see the CDHP benefit booklet at:

http://www.lanl.gov/worklife/benefits/pdfs/bcbsnm_cdhp.pdf

- **The National Medicare Supplement Plan At-a-Glance**

This plan is available only for those with Medicare coverage.

The Medicare Supplement plan is available only for those with Medicare Part A and B coverage. This plan is intended to complement Medicare by acting as a secondary insurance; picking up deductibles and co-insurance amounts that remaining after Medicare has paid its portion. With the Medicare Supplement plan all Medicare-allowable services are covered with additional benefits added for emergency services outside of Medicare territorial limits. For more information, please see the Medicare Supplement benefit booklet:

http://www.lanl.gov/worklife/benefits/pdfs/medicare_supplement.pdf

➤ **Mental and Behavioral Health Plan**

As previously stated, the insurance carrier for the mental and behavioral health plan for 2011 has changed. Blue Cross Blue Shield of New Mexico will be assuming the responsibility from Mesa Mental Health as the insurance carrier for LANL mental and behavioral health care.

➤ **Prescription Coverage**

All prescription coverage is provided through Blue Cross Blue Shield of New Mexico (Prime Therapeutics). There are no changes to prescription coverage for 2011. The co-pay structure of prescription drug coverage is available online at the Benefits website (<http://www.lanl.gov/worklife/benefits/>) or by calling the Benefits Office at (505) 667-1806 or toll-free at 1-877-667-1806.

➤ **Blue Cross Blue Shield of New Mexico On-Site Claims Advocate**

Retirees may continue to enjoy the convenience of one-on-one, in-person assistance at the Blue Cross Blue Shield facility in Albuquerque.

Blue Cross Blue Shield of New Mexico Full Service Unit
4373 Alexander Blvd. NE
Albuquerque, N.M. 87107
Monday – Friday, 8 a.m. – 5 p.m.

In addition, Mariette “Syd” Peavy remains the dedicated claims advocate with Blue Cross Blue Shield of New Mexico, and she will be happy to assist you directly with any claims or medical benefit coverage issues. You can reach Syd as follows:

Mariette “Syd” Peavy

mariette_peavy@bcbsnm.com

(505)-962-7277

➤ **Dental Plan (Delta Dental of California)**

There are no changes to the dental plan design for 2011. For questions regarding your dental insurance coverage, please contact Delta Dental as follows:

Member Services

1-800-777-5854

Summary Document

http://www.lanl.gov/worklife/benefits/pdfs/dd_evidence_coverage.pdf

➤ **Vision Plan (V.S.P.)**

There are no changes to the vision plan design for 2011. For questions regarding your vision insurance, please contact VSP as follows:

Member Services	1-800-877-7195
Summary Document	http://www.lanl.gov/worklife/benefits/pdfs/vsp_retirees.pdf

➤ **Group Legal (ARAG)**

As previously stated, retirees enrolled in legal coverage will experience limits on Matrimonial Proceeding benefits, which will be limited to 15 hours, and Child Support/Child Custody benefits, which will be limited to 8 hours. A 2011 plan enhancement will include the addition of benefits for Defense of Civil Damage Claims and Property Protection. For questions regarding your legal insurance, please contact ARAG as follows:

Member Services	1-800-741-4306
Summary Document	http://www.lanl.gov/worklife/benefits/pdfs/arag_bp_06.pdf

➤ **Accidental Death & Dismemberment (AD&D)**

There are no changes to the AD&D plan design for 2011. For questions regarding your AD&D coverage please contact The Hartford.

Member Services	1-800-303-9744
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2011 Monthly Medicare and Non-Medicare Retiree Insurance Premiums:

For formatting reasons, gross costs are not included in this booklet. To calculate gross cost, simply add the retiree cost and the LANS cost together. A complete premium sheet reflecting gross cost will be available on the retiree benefits website. Additionally, a personalized benefit statement will be sent to you by Hewitt and Associates *Your Benefit Resources* (YBR) in October. Your statement will reflect your current benefit elections and expected premium changes for 2011.

➤ **Medicare-Eligible Retirees 2011 Health Insurance Premiums:**

Estimated 2011 Medicare Part B Reimbursement is \$96.40/month per eligible participant.

2011 Retiree <u>Medicare</u> Monthly Health Insurance Premiums											
BCBSNM National EPO											
Retiree Only		Spouse Only		Retiree + Spouse		Retiree + Children		Spouse + Child(ren)		Family	
Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS
\$74	\$290	\$74	\$290	\$132	\$518	\$132	\$518	\$132	\$518	\$200	\$774
BCBSNM National PPO											
Retiree Only		Spouse Only		Retiree + Spouse		Retiree + Children		Spouse+ Child(ren)		Family	
Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS
\$76	\$304	\$76	\$304	\$160	\$646	\$160	\$646	\$160	\$646	\$232	\$930
BCBSNM National Medicare Supplement											
Retiree Only		Spouse Only		Retiree + Spouse		Retiree + Children		Spouse + Child(ren)		Family	
Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS
\$78	\$308	\$78	\$308	\$164	\$654	\$164	\$654	\$164	\$654	\$242	\$968

➤ **Non-Medicare Retirees 2011 Health Insurance Premiums:**

All medical and dental rates provided are subject to the provisions of Graduated Eligibility. If you were hired after January 1, 1990, the Laboratory will contribute a percentage of the employer cost toward your overall premium for medical and dental coverage, and you are responsible for all remaining premium cost.

2011 Retiree <u>Non-Medicare</u> Monthly Health Insurance Premiums											
BCBSNM National EPO											
Retiree Only		Spouse Only		Retiree + Spouse		Retiree + Children		Spouse + Child(ren)		Family	
Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS
\$106	\$412	\$106	\$412	\$222	\$866	\$190	\$742	\$190	\$742	\$306	\$1,192
BCBSNM National PPO											
Retiree Only		Spouse Only		Retiree + Spouse		Retiree + Children		Spouse+ Child(ren)		Family	
Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS
\$134	\$520	\$134	\$520	\$280	\$1,092	\$240	\$938	\$240	\$938	\$388	\$1,506
BCBSNM National CDHP											
Retiree Only		Spouse Only		Retiree + Spouse		Retiree + Children		Spouse + Child(ren)		Family	
Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS	Retiree	LANS
\$100	\$390	\$100	\$390	\$210	\$820	\$180	\$702	\$180	\$702	\$292	\$1,130

➤ **Medicare or Non-Medicare Retiree 2011 Dental, Vision, and Legal Premiums:**

Dental			
Retiree	Retiree + Spouse	Retiree + Child(ren)	Family
\$43.11	\$80.46	\$87.79	\$143.66
Vision			
Retiree	Retiree + Spouse	Retiree + Child(ren)	Family
\$9.82	\$19.65	\$19.85	\$24.57
Legal			
Retiree	Retiree + Spouse	Retiree + Child(ren)	Family
\$10.73	\$14.37	\$14.37	\$15.59

➤ **Graduated Eligibility:**

<u>Graduated Eligibility Table</u>		
Years of Service	% of Employer Contribution	% of Retiree Contribution
10	50%	50%
11	55%	45%
12	60%	40%
13	65%	35%
14	70%	30%
15	75%	25%
16	80%	20%
17	85%	15%
18	90%	10%
19	95%	05%
20+	100%	N/A

Changing Your Benefit Elections:

Before you begin the 2011 Open Enrollment process, be sure to review your personalized benefit statement from Hewitt and Associates *Your Benefit Resources* (YBR) to be sent in October. This statement will reflect your current benefit elections and expected premium changes for 2011. Any questions regarding this statement should be directed to Hewitt and Associates *Your Benefit Resources* 1-866-934-1200.

Please know that if you are satisfied with your current enrollments and have no plan changes to make, you do not need to do anything for 2011 Open Enrollment.

If you are eligible for **Medicare**, you must **enroll in Medicare Parts A and B**.
Please see the LANS Retiree Health and Welfare Plan Summary for more information
http://www.lanl.gov/worklife/benefits/pdfs/plan_retiree.pdf

➤ **What You Can Do During Open Enrollment:**

Open Enrollment changes will go into effect on January 1, 2011.

- **Plans available for enrollment, cancellation, or change during 2011 Open Enrollment:**

- Medical
- Dental
- Vision
- Legal

- **Actions you can take during 2011 Open Enrollment:**

- **Enroll**

- Enroll or re-enroll in medical, dental, vision, and/or group legal plan(s) if you previously opted out
- Enroll or re-enroll eligible family members in your medical, dental, vision, and/or group legal plan(s).

- **Cancel**

- Cancel your medical, dental, vision, and/or group legal plan(s);\
- Cancel medical, dental, vision, and/or group legal plan(s) for currently enrolled family members.

- **Change**

- Change to a different medical plan
- Change coverage levels for medical, dental, vision, and/or group legal plan(s).

➤ **How to Enroll or Make Changes:**

1. Gather and Review Data

- Review your personalized benefit statement from Hewitt and Associates YBR (mailed separately)
- Evaluate benefit offerings for 2011 and determine which plan(s) suit your needs
- Carefully review the costs of each plan, including monthly premium and out-of-pocket costs (e.g., deductibles, co-payments, co-insurance)
- Make sure all dependents meet eligibility guidelines for 2011 before you enroll them or allow enrollment to continue into the next plan year.

2. Contact YBR to Enroll

- You may enroll in medical or change your current benefits through Hewitt and Associates YBR between 6:00 a.m. (MST) on October 25, 2010 and 10:59 p.m. (MST) November 19, 2010.
 - On-line: www.ybr.com/benefits/lanl.
 - Toll Free: 1-866-934-1200 (Mon – Fri, 6:00 a.m. – 7:00 p.m. MST),
 - Corrections and changes will be allowed via phone through the end of the year,
 - Hewitt and Associates YBR also allows retirees to set up direct debit options for payment of medical, dental and vision premiums, as well as a Direct Deposit form for Part B Reimbursements through Mellon Bank.

3. Confirm Your Elections

- You must ensure that your selection has been accepted
 - Please **print out the confirmation page** at the end of the enrollment process and keep it for your records.
 - ***Correct any discrepancies with Hewitt and Associates Your Benefit Resources immediately!***

Plan Notifications:

- **Qualified Life Events:**

Qualified life events can occur at any point throughout the year regardless of Open Enrollment. If you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. Your special enrollment request must be made with Hewitt and Associates YBR within 31 days after the marriage, birth, adoption, or placement for adoption.

- **Dependent Eligibility:**

If an enrolled family member loses eligibility during the year, you are responsible for de-enrolling that family member with Hewitt and Associates YBR within 31 days of the change in eligibility.

You are responsible for costs incurred in connection with the enrollment of ineligible family members and you could be subject to penalties associated with Misuse of Plan if you continue coverage for family members who no longer meet eligibility rules. For additional information, please see the LANS Health and Welfare Benefit Plan for Retirees document (http://www.lanl.gov/worklife/benefits/pdfs/plan_retiree.pdf)

- **Social Security Numbers for Dependents:**

The Mandatory Insurer Reporting Law (Section 111 of Public Law 110-173) requires group health plan insurers to report Social Security numbers in order for Medicare to coordinate payments with other insurance companies. The law was enacted in late 2007 and became effective on January 1, 2009. As a subscriber (or spouse or family member of a subscriber) to a LANL Group Health Plan arrangement, the Social Security numbers of enrolled retirees and dependents, must be up-to-date with Hewitt and Associates, Your Benefit Resources.

- **Health Insurance Portability and Accountability Act (HIPAA) Special Enrollment Rights**

If you decline enrollment in medical, dental, and/or vision coverage for yourself or your eligible dependents because you are currently enrolled in other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in medical, dental, and/or vision coverage if you or your dependents lose eligibility for that other coverage (or if the employer stopped contributing toward your or your dependents' other coverage). However, you must request enrollment with Hewitt and Associates YBR within 31 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

Annual Notices Required by Law:

- **The Women's Health and Cancer Rights Act of 1998 (WHCRA) (Benefits for Mastectomy-Related Services)**

The medical programs sponsored by LANS will not restrict benefits if you or your dependent receives benefits for a mastectomy and elects breast reconstruction in connection with the mastectomy. Benefits will not be restricted provided that the breast reconstruction is performed in a manner determined in consultation with you or your dependent's physician and may include:

- all stages of reconstruction of the breast on which the mastectomy was performed;
- surgery and reconstruction of the other breast to produce a symmetrical appearance; and
- prostheses and treatment of physical complications of all stages of mastectomy, including lymphedema.

Benefits for breast reconstruction will be subject to annual deductibles and co-insurance amounts consistent with benefits for other covered services under the program. For details on any state laws that may apply to your medical program, please refer to the benefit program material for the medical program in which you are enrolled.

- **COBRA General Notice**

Under a federal law called the Consolidated Omnibus Budget Reconciliation Act of 1985, or COBRA, LANS retirees and/or their dependents may be eligible to continue health program coverage (called "COBRA coverage") at group rates. Health benefit program coverage includes medical, dental, and vision.

COBRA coverage is available in certain qualifying events where health benefit program coverage would otherwise end. You may elect to continue coverage at your own expense on an after-tax basis when the coverage that you have through the Plan ends. The coverage may change as permitted or required by changes in any applicable law. For more information, please see the LANS Health and Welfare Benefit Plan for Retirees (http://www.lanl.gov/worklife/benefits/pdfs/plan_retiree.pdf).

If you do not have access to this document online, a hard copy will be provided upon request.

- **Medicare Part D Notice**

This notice concerns your current prescription drug coverage and your options under Medicare's prescription drug coverage. The prescription drug coverage offered by the Los Alamos National Laboratory is, on average for all plan participants, expected to payout as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan. You will receive more information regarding your Medicare Part D Prescription and a Credible Coverage certification from Hewitt and Associates in the coming months.

2011 LANL Carrier Contact Information

Plan Administration	Hewitt and Associates Your Benefit Resources (YBR)	
	Website	http://www.ybr.com/benefits/lanl
	Member Services	1-866-934-1200
	Please call YBR to:	
	<ul style="list-style-type: none">▪ Enroll, cancel, or change your benefits,▪ Report a qualified (marriage, divorce) or address change, and▪ Any ongoing issues with your insurance eligibility or coverage.	

Medical	Blue Cross Blue Shield of New Mexico			
	Group Number	EPO (N13793); PPO (N13794); CDHP (N13795)		
	Website	http://www.bcbsnm.com/lanl		
	Member Services	1-877-878-5265		
	Claims Address	P.O. Box 27630 Albuquerque, NM 87125-7630		
	Claims Advocate	Mariette "Syd" Peavy	Mariette_peavy@bcbsnm.com	505-962-7277

Dental	Delta Dental of California			
	Group Number	4000		
	Website	www.deltadentalins.com/lans/		
	Member Services	1-800-777-5854		
	Claims Address	P.O. Box 997105 Sacramento, C.A. 95899-7105		

Vision	Vision Service Plan (VSP)		
	Website	https://www.vsp.com/home.html	
	Member Services	1-800-877-7195	
	PO Box 997105 Sacramento, CA 95899-7105		

Legal	ARAG Legal Plan (Group Legal)	
	Group Number	14822
	Website	http://araglegalcenter.com/home/login/index.htm
	Member Services	1-800-247-4184
	400 Locust Street, Suite 480 Des Moines, IA 50309	

401(k)	Fidelity Investments (401(k))			
	Website	https://netbenefits.fidelity.com/		
	Member Services	1-800-835-5095		

LANS	The Laboratory's Benefits Office (Human Resources)			
	Phone	1-505-667-1806 or 1-800-667-1806		
	Email	benefits@lanl.gov		
	Website	http://www.lanl.gov/worklife/benefits/		
	Mailing Address	P.O. Box 1663, MS P280 Los Alamos, NM 87544		